Pilot projects have been launched in 10 districts to facilitate, among other things, health promotion and early detection of the disease through opportunistic screening.

Proper treatment for swine flu patients

543. SHRI A. VIJAYARAGHAVAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the measures taken by the Central Government to give proper treatment to patients suffering from Swine Flu; and

(b) what assistance has been given to the States to tackle the Swine Flu situation?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) Government of India took a series of actions. A comprehensive plan including guidelines was provided to the State Government.

Community surveillance to detect clusters of influenza like illness is being done through Integrated Disease Surveillance Project. Laboratory network has been strengthened and States allocated to different laboratories. There are 42 laboratories (24 in Govt. Sector and 18 in Private Sector) testing the clinical samples. Central teams were deputed to the states of Punjab, Karnataka, Andhra Pradesh, Kerala to contain the disease.

Government of India procured 40 million capsules and 4 lakh bottles of Gseltamivir, the drug to treat H1N1 Flu. 18 million have been given to the States/UTs. State-wise list is at Statement-I (*See* below). The drug is also used for chemoprophylaxis to prevent further spread. Adequate stock of personal protective equipments, has been kept. States have also been provided with deterrent stock Statement-II (*See* below). Three Indian manufacturers of Vaccine are being supported to manufacture H1N1 vaccine. Four million doses are being imported to vaccinate the high risk group, to begin with health care workers in all states. Training of district level teams is supported by Ministry of Health and Family Welfare. IMA has been provided funds to train private practitioners through their state units.

All States have been requested to gear up the State machinery, open large number of screening centres and strengthen isolation facilities at district level.

A task force in the I&B Ministry is implementing the media plan. Travel advisory, do's and don'ts and other pertinent information on non pharmaceutical interventions to prevent the spread has been widely published in print media and shown in visual media on regular basis. This has been translated to 14 languages and given to the States. Information is also provided on the website: http://mohfw-hlnl.nic.in

Statement-I

Details of supply of Oseltamivir to the States and UTs (As on 16/11/09)

S.N.	States	Oseltamivir Capsules	Oseltamivir Syrup
1	2	3	4
1.	Tamil Nadu	997000	9,700
2	Karnataka	882000	7,800
3	Kerala	737000	4,600
4	Andhra Pr.	827000	8,000
5	Goa	42000	600
6	Puducherry	80000	900
7	Maharashtra	2984000	52,700
8	Rajasthan	682000	7,200
9	Uttar Pradesh	1557000	17,800
10	Delhi	622000	6,200
11	West Bengal	707000	6,700
12	J&K	462000	4,610
13	Himachal Pr.	247000	2,500
14	Jharkhand	522000	6,100
15	Gujarat	707000	7,600
16	Uttarakhand	267000	2,800
17	Manipur	197000	1,900
18	Mizoram	172000	2,000
19	Nagaland	222000	2,300
20	Arunachal Pr.	322000	3,300
21	Meghalaya	142000	1,500
22	Sikkim	82000	900
23	Assam	542000	5,500
24	Tripura	82000	900
25	Punjab	452000	5,440
26	Haryana	442000	4,900
27	Madhya Pradesh	1082000	11,900

1	2	3	4
28	Bihar	797000	8,300
29	Chhattisgarh	362000	3,700
30	A & N Island	60000	600
31	Daman & Diu	40000	400
32	D & N Haveli	20000	200
33	Chandigarh	20000	200
34	Lakshadweep	20000	200
35	Orissa	612000	6,100

Statement-II

Details of supply of Personal Protective Equipments and Masks to the States (As on 16/11/09)

S.No.	States	PPE	N-95	Triple Layer Masks
1	2	3	4	5
1	Tamil Nadu	3,000	2,000	38,000
2	Karnataka	2,200	1,000	33,000
3	Kerala	5,500	9,500	53,000
4	Andhra Pradesh	3,000	1000	30,000
5	Goa	800	500	8,000
6	Puducherry	1,000	500	13,000
7	Maharashtra	11,300	11,000	39,000
8	Rajasthan	3,000	1,000	30,000
9	Uttar Pradesh	2,500	1,500	31,000
10	Delhi *	-	-	-
11	West Bengal	3,500	2,500	39,000
12	Jammu & Kashmir	3,000	1,500	40,000
13	Himachal Pradesh	1,500	1,000	16,000
14	Jharkhand	1,000	500	13,000
15	Gujarat	2,500	1,500	29,000
16	Uttarakhand	1,000	500	13,000
17	Manipur	2,000	2,000	62,000

1	2	3	4	5
18	Mizoram	2,000	600	53,000
19	Nagaland	1,500	500	53,000
20	Arunachal Pr.	1,500	500	53,000
21	Meghalaya	1,500	500	53,000
22	Sikkim	1,500	500	53,000
23	Assam	1,500	500	53,000
24	Tripura	1,500	500	53,000
25	Punjab	2,500	10,500	35,000
26	Haryana	1,000	500	13,000
27	Madhya Pradesh	2,000	1,500	35,000
28	Bihar	2,500	1,500	33,000
29	Chhattisgarh	1,000	500	15,000
30	A & N Island	800	500	8,000
31	Daman & Diu	800	500	8,000
32	D & N Haveli	800	500	8,000
33	Chandigarh	800	500	8,000
34	Lakshadweep	800	500	8,000
35	Orissa	3,000	2,000	40,000

*Delhi procured its own stock.

Public spending on health

544. SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the United Progressive Alliance (UPA) led Government in 2004-09 lagged behind in providing effective health care to the rural population in 18 States of the country when the National Rural Health Mission (NRHM) had already started functioning from 2005;

(b) if so, in what manner, the new UPA Government proposes to raise public spending on health as promised from 0.9 per cent of GDP to 2.3 per cent of GDP by 2012;

(c) if not, the reasons therefor; and

(d) what steps Government have taken or propose to take in this regard till date?